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| <b>TRANSMITTAL FORM</b><br><br>(to be used for all correspondence after initial filing) | Application Number     | 10738,411           |
|   | Filing Date            | December 15, 2003   |
|   | First Named Inventor   | NICHOLSON, James W. |
|   | Art Unit               | 3731                |
|   | Examiner Name          | Unassigned          |
| Total Number of Pages in This Submission  | Attorney Docket Number | PA1682              |

| ENCLOSURES (Check all that apply)   |  |   |
|---|--|---|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><br><input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input checked="" type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br><input type="checkbox"/> Change of Correspondence Address<br><br><input type="checkbox"/> Terminal Disclaimer<br><br><input type="checkbox"/> Request for Refund<br><br><input type="checkbox"/> CD. Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><br><input type="checkbox"/> Proprietary Information<br><br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>Copy of PCT Search Report, Cited EP Reference; and Return Postcard |
| Remarks   |  |   |

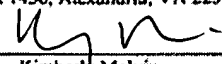
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |                          |          |        |
|--|--------------------------|----------|--------|
| Firm Name                                  | Medtronic Vascular, Inc. |          |        |
| Signature                                  |                          |          |        |
| Printed name                               | James F. Crittenden      |          |        |
| Date                                       | April 14, 2005           | Reg. No. | 39,560 |

| CERTIFICATE OF TRANSMISSION/MAILING   |                 |      |                |
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| Signature   |                 |      |                |
| Typed or printed name   | Kimberly Melvin | Date | April 14, 2005 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

|              |   |   |                   |      |
|--------------|---|---|-------------------|------|
| Appln. No.   | : | 10/736,411  | Confirmation No.: | 3962 |
| Applicant    | : | NICHOLSON, James W.   |                   |      |
| Filed        | : | December 15, 2003   |                   |      |
| TC/A.U.      | : | 3731  |                   |      |
| Examiner     | : | Unassigned  |                   |      |
| Docket No.   | : | PA1682  |                   |      |
| Customer No. | : | 28390   |                   |      |
| Title        | : | Embolic Containment System With Asymmetric Frictional Control |                   |      |

**INFORMATION DISCLOSURE STATEMENT UNDER RULE 1.56**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:


Applicant(s) herein make available to the Patent and Trademark Office a copy of Form PTO-1449. The undersigned hereby certifies that each item of information contained in this information disclosure statement was cited in a communication from a foreign patent office in a counterpart foreign application not more than three months prior to the filing of this statement. A copy of the Search Report is enclosed, citing the references. No fee is required. The Commissioner is hereby authorized to charge any additional fees which may be required under 37 C.F.R. 1.17, or credit any overpayment, to Deposit Account No. 01-2525.

The listed documents are brought to the Examiner's attention because they are known to the applicant and/or the applicant's attorney and may be considered by the Examiner to be material to his/her examination. This listing should not be construed as representation that a search has been made or that no better art exists. No inference should be made that the documents are in fact material merely because they are referenced herein. Moreover, no representation is made that any brief descriptions of the references herein necessarily describe the most material aspects of the references. Further, by this listing, the applicant is not making any admission regarding the relative dates of the invention and listed disclosures.

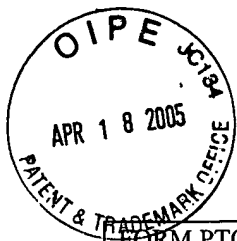
The Examiner is requested to consider carefully the complete text of these documents in connection with the examination of the above-identified application in accordance with 37 CFR 1.104(a). It is requested that the documents listed on the attached Form PTO-1449 be included in the "References Cited" portion of any patent issuing from this application (M.P.E.P. 1302.12), and that the Examiner initial and return a copy of the form to evidence consideration of the documents.

Dated: April 14, 2005

Respectfully submitted,

  
James F. Crittenden  
Registration No. 39,560  
Agent for Applicant

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| FORM PTO-1449 (Modified)<br><br>LIST OF PATENTS AND PUBLICATIONS FOR<br>APPLICANT'S INFORMATION DISCLOSURE<br>STATEMENT<br>(Use several sheets if necessary) | ATTY. DOCKET NO.<br>PA1682       | SERIAL NO.<br>10/736,411 |
|  | APPLICANT<br>Nicholson, James W. |                          |
|  | FILING DATE<br>December 15, 2003 | GROUP ART UNIT<br>3731   |
|  |                                  |                          |

**REFERENCE DESIGNATION****U.S. PATENT DOCUMENTS**

| Examiner<br>Initials | Cite<br>No. | Document<br>Number | Publication Date<br>MM-DD-YYYY | Name of Patentee or Applicant of<br>Cited Document | Pages, Columns, Lines,<br>Where Relevant Passages or<br>Relevant Figures Appear |
|----------------------|-------------|--------------------|--------------------------------|--|---|
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**FOREIGN PATENT DOCUMENTS**

|  | Cite<br>No. | Foreign Patent Document | Publication Date<br>MM-DD-YYYY | Name of Patentee or Applicant of Cited<br>Document | Pages, Columns, Lines, Where<br>Relevant Passages or Relevant<br>Figures Appear |
|--|-------------|-------------------------|--------------------------------|--|---|
|  | 1           | EP 1 344 502 A          | 09/17/2003                     | Medtronic Vascular, Inc.                           |   |
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**OTHER ART (Including Author, Title, Date, Pertinent Pages, Etc.)**

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| EXAMINER  | DATE CONSIDERED |
| EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance <i>and</i> not considered. Include copy of this form with next communication to applicant. |                 |